

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTHState File No. 170Registered No. 30

1. PLACE OF BIRTH

County Gila State ARIZONADistrict or Township Lower Miami or VillageCity MIAMI No. 69 Wilson St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Gladys Luella Sanders If child is not yet named, make supplemental report, as directed.3. Sex of Child To be answered ONLY } 4. Twin, triplet or other. 6. Legitimate? 7. Date
female In event of plural } } of birth Jan 20 1931
births. } } Month Day Year8. FATHER Full name Marion McEuen Sanders 14. MOTHER Full maiden name Anna Brown9. Residence (Usual place of abode) MIAMI, ARIZONA 15. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state. If non-resident, give place and state.10. Color or race white 11. Age at last birthday 33 (Years) 16. Color or race white 17. Age at last birthday 22 (Years)12. Birthplace (city or place) Safford 18. Birthplace (city or place) Texas
(State or country) Ozark (State or country)13. Occupation Truck driver 19. Occupation Housewife
Nature of Industry State Highway Nature of Industry20. Number of children of this mother 2 } (a) Born alive and now living 2
(Taken as of time of birth of child herein } (b) Born alive but now dead 0
certified and including this child.) } (c) Stillborn 0CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was alive at 2:45 P m. on the date above stated.
(Born alive or stillborn)Signature J. F. Miller
F. F. MILLER, M. D.
(Physician or midwife.)Given name added from a supplemental report. Address MIAMI, ARIZONA
Month, day, year Jan 31 1931
Registrar. G. E. Jones Registrar.

722-120-125

each in order of birth stated.